

<i>SERFF Tracking Number:</i>	<i>STFL-126187658</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>42648</i>
<i>Company Tracking Number:</i>	<i>SFL080251AR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>Return of Premium Pg 3_4</i>		
<i>Project Name/Number:</i>	<i>ROP Cash Value Change/SFL08025.1AR</i>		

Filing at a Glance

Company: State Farm Life Insurance Company

Product Name: Return of Premium Pg 3_4

TOI: L04I Individual Life - Term

Sub-TOI: L04I.500 Other

Filing Type: Form

SERFF Tr Num: STFL-126187658 State: Arkansas

SERFF Status: Closed-Accepted State Tr Num: 42648

For Informational Purposes

Co Tr Num: SFL080251AR

State Status: Filed-Closed

Reviewer(s): Linda Bird

Author: Christy Conn

Disposition Date: 06/16/2009

Date Submitted: 06/12/2009

Disposition Status: Accepted For

Informational Purposes

Implementation Date:

Implementation Date Requested: 11/15/2009

State Filing Description:

General Information

Project Name: ROP Cash Value Change

Project Number: SFL08025.1AR

Requested Filing Mode: Informational

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 06/16/2009

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 06/16/2009

Created By: Christy Conn

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Christy Conn

Filing Description:

NAIC # 69108

FEIN #37-0533090

RE: INFORMATIONAL FILING

Dear Sir or Madam:

Enclosed is the revised actuarial memorandum for policy form 08025. It is our plan to implement the minimum cash

SERFF Tracking Number: STFL-126187658 State: Arkansas
 Filing Company: State Farm Life Insurance Company State Tracking Number: 42648
 Company Tracking Number: SFL080251AR
 TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other
 Product Name: Return of Premium Pg 3_4
 Project Name/Number: ROP Cash Value Change/SFL08025.1AR

value calculation under Actuarial Guideline XLV for policies sold which requires a cash value higher than our current contract.

Form 08025 was approved by your Department on August 11, 2008 under state filing number 38911 and SERFF tracking number 125630121.

The form number on pages 3 and 4 of policy 08025 have been revised to 08025.1(R20) and 08025.1(R30) to reflect the implementation of this change.

The effective date of this change is November 15, 2009.

Company and Contact

Filing Contact Information

Christy Conn, Analyst - Contracts & Compliance
 christy.conn.CX2T@statefarm.com
 One State Farm Plaza
 309-735-7703 [Phone]
 Bloomington, IL 61710-0001
 309-766-8483 [FAX]

Filing Company Information

State Farm Life Insurance Company	CoCode: 69108	State of Domicile: Illinois
1 State Farm Plaza	Group Code:	Company Type:
Bloomington, IL 61710-0001	Group Name:	State ID Number:
(309) 766-4541 ext. [Phone]	FEIN Number: 37-0533090	

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? Yes
 Fee Explanation: 2 forms @ \$50.00 = \$100.00

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Life Insurance Company	\$100.00	06/12/2009	28539126

<i>SERFF Tracking Number:</i>	<i>STFL-126187658</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>SFL080251AR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>Return of Premium Pg 3_4</i>		
<i>Project Name/Number:</i>	<i>ROP Cash Value Change/SFL08025.1AR</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Linda Bird Informational Purposes		06/16/2009	06/16/2009

<i>SERFF Tracking Number:</i>	<i>STFL-126187658</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>42648</i>
<i>Company Tracking Number:</i>	<i>SFL080251AR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>Return of Premium Pg 3_4</i>		
<i>Project Name/Number:</i>	<i>ROP Cash Value Change/SFL08025.1AR</i>		

Disposition

Disposition Date: 06/16/2009

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>STFL-126187658</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>42648</i>
<i>Company Tracking Number:</i>	<i>SFL080251AR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>Return of Premium Pg 3_4</i>		
<i>Project Name/Number:</i>	<i>ROP Cash Value Change/SFL08025.1AR</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Actuarial Memorandum Attachment 1		No
Supporting Document	Actuarial Memorandum Attachment 2		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Policy Identification Pages 3 & 4		Yes
Form	Policy Identification Pages 3 & 4		Yes

SERFF Tracking Number:	STFL-126187658	State:	Arkansas
Filing Company:	State Farm Life Insurance Company	State Tracking Number:	42648
Company Tracking Number:	SFL080251AR		
TOI:	L04I Individual Life - Term	Sub-TOI:	L04I.500 Other
Product Name:	Return of Premium Pg 3_4		
Project Name/Number:	ROP Cash Value Change/SFL08025.1AR		

Form Schedule

Lead Form Number: 08025.1(R20)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	08025.1(R20)	Schedule Pages	Policy Identification Pages 3 & 4	Initial			L08025(R20) 04 Pg 3_4 20090511_bracketed.pdf
	08025.1(R30)	Schedule Pages	Policy Identification Pages 3 & 4	Initial			L08025(R30) 04 Pg 3_4 20090511_bracketed.pdf

P O L I C Y I D E N T I F I C A T I O N

Insured	[JOHN J DOE]	Age	[35]
	[(Male)]		
Policy Number	LF-[0000-0000]	Basic Plan Amount	[\$[100,000]]
Policy Date	[November 15, 2009]		
Issue Date	[November 15, 2009]		

S C H E D U L E O F B E N E F I T S

Form	Description	Initial Amount	Benefit Period Ends	Annual Premium	Premiums Payable
08025	Basic Plan (Adjustable Premium Level Term to Age 95 With Return of Premium Benefit)	[\$[100,000]]	In [2069]	[\$[597.00]]*	To [2029]*
	* Subsequent premiums included below				
	Class of Risk: [Male Non-Tobacco]				
	Initial Premium Guarantee Period: 20 Years				
	Level Premium Period: 20 Years				
	See Adjustment of Basic Plan Premiums provision on page 8 for Basic Plan Premiums after the Initial Premium Guarantee Period.				

S C H E D U L E O F P R E M I U M S

The Basic Plan Premiums are included below. Monthly premiums must be paid under one of the monthly payment plans made available.

Beginning	Annual	Monthly
[November 15, 2009]	\$ [597.00]	\$ [51.94]
[November 15, 2010]	[597.00]	[51.94]
[November 15, 2011]	[597.00]	[51.94]
[November 15, 2012]	[597.00]	[51.94]
[November 15, 2013]	[597.00]	[51.94]
[November 15, 2014]	[597.00]	[51.94]
[November 15, 2015]	[597.00]	[51.94]
[November 15, 2016]	[597.00]	[51.94]
[November 15, 2017]	[597.00]	[51.94]
[November 15, 2018]	[597.00]	[51.94]
[November 15, 2019]	[597.00]	[51.94]
[November 15, 2020]	[597.00]	[51.94]
[November 15, 2021]	[597.00]	[51.94]
[November 15, 2022]	[597.00]	[51.94]
[November 15, 2023]	[597.00]	[51.94]
[November 15, 2024]	[597.00]	[51.94]
[November 15, 2025]	[597.00]	[51.94]
[November 15, 2026]	[597.00]	[51.94]
[November 15, 2027]	[597.00]	[51.94]
[November 15, 2028]	[597.00]	[51.94]

SCHEDULE OF PREMIUMS

Continued From Page 3

Beginning	Annual	Monthly
[November 15, 2029]	\$ [1,821.00]	\$ [158.43]
[November 15, 2030]	[2,019.00]	[175.66]
[November 15, 2031]	[2,211.00]	[192.36]
[November 15, 2032]	[2,403.00]	[209.07]
[November 15, 2033]	[2,628.00]	[228.64]
[November 15, 2034]	[2,901.00]	[252.39]
[November 15, 2035]	[3,234.00]	[281.36]
[November 15, 2036]	[3,621.00]	[315.03]
[November 15, 2037]	[4,044.00]	[351.83]
[November 15, 2038]	[4,485.00]	[390.20]
[November 15, 2039]	[4,944.00]	[430.13]
[November 15, 2040]	[5,409.00]	[470.59]
[November 15, 2041]	[5,895.00]	[512.87]
[November 15, 2042]	[6,408.00]	[557.50]
[November 15, 2043]	[6,984.00]	[607.61]
[November 15, 2044]	[7,656.00]	[666.08]
[November 15, 2045]	[8,472.00]	[737.07]
[November 15, 2046]	[9,426.00]	[820.07]
[November 15, 2047]	[10,431.00]	[907.50]
[November 15, 2048]	[11,511.00]	[1,001.46]
[November 15, 2049]	[12,687.00]	[1,103.77]
[November 15, 2050]	[14,013.00]	[1,219.14]
[November 15, 2051]	[15,555.00]	[1,353.29]
[November 15, 2052]	[17,346.00]	[1,509.11]
[November 15, 2053]	[19,353.00]	[1,683.72]
[November 15, 2054]	[21,591.00]	[1,878.42]
[November 15, 2055]	[24,024.00]	[2,090.09]
[November 15, 2056]	[26,601.00]	[2,314.29]
[November 15, 2057]	[29,415.00]	[2,559.11]
[November 15, 2058]	[32,544.00]	[2,831.33]
[November 15, 2059]	[36,024.00]	[3,134.09]
[November 15, 2060]	[39,852.00]	[3,467.13]
[November 15, 2061]	[43,989.00]	[3,827.05]
[November 15, 2062]	[48,387.00]	[4,209.67]
[November 15, 2063]	[53,001.00]	[4,611.09]
[November 15, 2064]	[57,597.00]	[5,010.94]
[November 15, 2065]	[62,121.00]	[5,404.53]
[November 15, 2066]	[66,861.00]	[5,816.91]
[November 15, 2067]	[71,859.00]	[6,251.74]
[November 15, 2068]	[77,124.00]	[6,709.79]

If the premium paid is not the annual premium, the total amount of premium due each year is greater than the annual premium. Premiums other than the annual premium are increased to reflect the time value of money.

This Policy is eligible for annual dividends; however, we do not expect to pay dividends on this Policy. Dividends are not guaranteed. See the Dividend Provision on page 7.

Initial payment of \$[597.00] will provide coverage to [November 15, 2010].

The premiums shown above include a policy fee. The policy fee for the annual premium is \$75.00 and for the monthly premium is \$6.53.

C U M U L A T I V E P R E M I U M
P E R C E N T A G E T A B L E

[Nov 15,] Percentage

[2009]	[0.00]%
[2010]	[0.00]%
[2011]	[0.00]%
[2012]	[6.50]%
[2013]	[25.10]%
[2014]	[37.00]%
[2015]	[45.50]%
[2016]	[52.10]%
[2017]	[57.50]%
[2018]	[62.20]%
[2019]	[66.30]%
[2020]	[70.20]%
[2021]	[73.80]%
[2022]	[77.20]%
[2023]	[80.50]%
[2024]	[83.80]%
[2025]	[87.00]%
[2026]	[90.20]%
[2027]	[93.40]%
[2028]	[96.70]%
[2029]	[100.00]%

S C H E D U L E O F I N S U R A N C E A N D V A L U E S

- Insurance Amount -		----- Guaranteed Values -----		
On		Cash	Extended	
Insured	[Nov 15,]	Value*	Term	Ins*
		Dollars	Yrs	Days
\$[100,000	2009	0.00	0	0]
[100,000	2010	0.00	0	0]
[100,000	2011	0.00	0	0]
[100,000	2012	116.42	0	326]
[100,000	2013	599.39	4	26]
[100,000	2014	1,104.45	6	150]
[100,000	2015	1,629.81	8	113]
[100,000	2016	2,177.26	9	351]
[100,000	2017	2,746.20	11	88]
[100,000	2018	3,342.01	12	72]
[100,000	2019	3,958.11	12	336]
[100,000	2020	4,610.03	13	192]
[100,000	2021	5,287.03	14	0]
[100,000	2022	5,991.49	14	114]
[100,000	2023	6,728.19	14	184]
[100,000	2024	7,504.29	14	223]
[100,000	2025	8,310.24	14	234]
[100,000	2026	9,154.40	14	230]
[100,000	2027	10,036.76	14	213]
[100,000	2028	10,968.68	14	193]
[100,000	2029	11,940.00	14	166]

The Cash Value is zero after the last Policy Anniversary shown above.

*Cash Values and Extended Term Periods shown above on the Policy Anniversary presume payment of the annual premium shown in the Schedule of Premiums on page 3 to the end of the prior Policy Year, no changes to this Policy as shown on page 3, the Cumulative Premium Percentage shown for each Policy Year on page 3, no Policy Loan or accrued Loan Interest, and no Annual Dividends.

The Cash Value shown on the Policy Anniversary after the end of the Level Premium Period is the amount of the Return of Premium Benefit and presumes payment of the annual premium shown in the Schedule of Premiums on page 3 until the end of the Level Premium Period, no Policy Loan or accrued Loan Interest, and no Annual Dividends. The Extended Term Period shown on the Policy Anniversary after the end of the Level Premium Period assumes the Owner sends Us a Request to use the Return of Premium Benefit as a single premium to provide Extended Term Insurance on that Policy Anniversary. The interest rate for single premiums and minimum cash values is 4.0% a year. The mortality table for Extended Term Insurance and minimum cash values is the Commissioners 2001 CSO Standard Ordinary [Nonsmoker] Ultimate Age Last Birthday Mortality Table.

Note: The Cash Value and Return of Premium Benefit will vary based on the actual Cumulative Premium.

P O L I C Y I D E N T I F I C A T I O N

Insured	[JOHN J DOE]	Age	[35]
	[(Male)]		
Policy Number	LF-[0000-0000]	Basic Plan Amount	[\$[100,000]]
Policy Date	[November 15, 2009]		
Issue Date	[November 15, 2009]		

S C H E D U L E O F B E N E F I T S

Form	Description	Initial Amount	Benefit Period Ends	Annual Premium	Premiums Payable
08025	Basic Plan (Adjustable Premium Level Term to Age 95 With Return of Premium Benefit)	[\$[100,000]]	In [2069]	[\$[630.00]]*	To [2039]*
	* Subsequent premiums included below				
	Class of Risk: [Male Non-Tobacco]				
	Initial Premium Guarantee Period: 30 Years				
	Level Premium Period: 30 Years				
	See Adjustment of Basic Plan Premiums provision on page 8 for Basic Plan Premiums after the Initial Premium Guarantee Period.				

S C H E D U L E O F P R E M I U M S

The Basic Plan Premiums are included below. Monthly premiums must be paid under one of the monthly payment plans made available.

Beginning	Annual	Monthly
[November 15, 2009]	\$ [630.00]	\$ [54.82]
[November 15, 2010]	[630.00]	[54.82]
[November 15, 2011]	[630.00]	[54.82]
[November 15, 2012]	[630.00]	[54.82]
[November 15, 2013]	[630.00]	[54.82]
[November 15, 2014]	[630.00]	[54.82]
[November 15, 2015]	[630.00]	[54.82]
[November 15, 2016]	[630.00]	[54.82]
[November 15, 2017]	[630.00]	[54.82]
[November 15, 2018]	[630.00]	[54.82]
[November 15, 2019]	[630.00]	[54.82]
[November 15, 2020]	[630.00]	[54.82]
[November 15, 2021]	[630.00]	[54.82]
[November 15, 2022]	[630.00]	[54.82]
[November 15, 2023]	[630.00]	[54.82]
[November 15, 2024]	[630.00]	[54.82]
[November 15, 2025]	[630.00]	[54.82]
[November 15, 2026]	[630.00]	[54.82]
[November 15, 2027]	[630.00]	[54.82]
[November 15, 2028]	[630.00]	[54.82]
[November 15, 2029]	[630.00]	[54.82]
[November 15, 2030]	[630.00]	[54.82]

SCHEDULE OF PREMIUMS

Continued From Page 3

Beginning	Annual	Monthly
[November 15, 2031]	\$ [630.00]	\$ [54.82]
[November 15, 2032]	[630.00]	[54.82]
[November 15, 2033]	[630.00]	[54.82]
[November 15, 2034]	[630.00]	[54.82]
[November 15, 2035]	[630.00]	[54.82]
[November 15, 2036]	[630.00]	[54.82]
[November 15, 2037]	[630.00]	[54.82]
[November 15, 2038]	[630.00]	[54.82]
[November 15, 2039]	[4,944.00]	[430.13]
[November 15, 2040]	[5,409.00]	[470.59]
[November 15, 2041]	[5,895.00]	[512.87]
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[November 15, 2049]	[12,687.00]	[1,103.77]
[November 15, 2050]	[14,013.00]	[1,219.14]
[November 15, 2051]	[15,555.00]	[1,353.29]
[November 15, 2052]	[17,346.00]	[1,509.11]
[November 15, 2053]	[19,353.00]	[1,683.72]
[November 15, 2054]	[21,591.00]	[1,878.42]
[November 15, 2055]	[24,024.00]	[2,090.09]
[November 15, 2056]	[26,601.00]	[2,314.29]
[November 15, 2057]	[29,415.00]	[2,559.11]
[November 15, 2058]	[32,544.00]	[2,831.33]
[November 15, 2059]	[36,024.00]	[3,134.09]
[November 15, 2060]	[39,852.00]	[3,467.13]
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[November 15, 2064]	[57,597.00]	[5,010.94]
[November 15, 2065]	[62,121.00]	[5,404.53]
[November 15, 2066]	[66,861.00]	[5,816.91]
[November 15, 2067]	[71,859.00]	[6,251.74]
[November 15, 2068]	[77,124.00]	[6,709.79]

If the premium paid is not the annual premium, the total amount of premium due each year is greater than the annual premium. Premiums other than the annual premium are increased to reflect the time value of money.

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Initial payment of \$[630.00] will provide coverage to [November 15, 2010].

The premiums shown above include a policy fee. The policy fee for the annual premium is \$75.00 and for the monthly premium is \$6.53.

Continued on Next Page
Page 3 Continued

C U M U L A T I V E P R E M I U M
P E R C E N T A G E T A B L E

[Nov 15,]	Percentage
[2009]	[0.00]%
[2010]	[0.00]%
[2011]	[0.00]%
[2012]	[0.00]%
[2013]	[9.30]%
[2014]	[19.20]%
[2015]	[26.30]%
[2016]	[31.70]%
[2017]	[36.10]%
[2018]	[39.80]%
[2019]	[43.10]%
[2020]	[46.10]%
[2021]	[49.00]%
[2022]	[51.70]%
[2023]	[54.30]%
[2024]	[56.80]%
[2025]	[59.20]%
[2026]	[61.70]%
[2027]	[64.10]%
[2028]	[66.50]%
[2029]	[69.00]%
[2030]	[71.60]%
[2031]	[74.20]%
[2032]	[76.90]%
[2033]	[79.80]%
[2034]	[82.70]%
[2035]	[85.70]%
[2036]	[89.00]%
[2037]	[92.50]%
[2038]	[96.10]%
[2039]	[100.00]%

SCHEDULE OF INSURANCE AND VALUES

- Insurance Amount -		----- Guaranteed Values -----		
On		Cash	Extended	
Insured	[Nov 15,]	Value*	Term	Ins*
		Dollars	Yrs	Days
\$[100,000	2009	0.00	0	0]
[100,000	2010	0.00	0	0]
[100,000	2011	0.00	0	0]
[100,000	2012	0.00	0	0]
[100,000	2013	234.36	1	245]
[100,000	2014	604.80	3	288]
[100,000	2015	994.14	5	149]
[100,000	2016	1,397.97	6	272]
[100,000	2017	1,819.44	7	351]
[100,000	2018	2,256.66	8	350]
[100,000	2019	2,715.30	9	269]
[100,000	2020	3,194.73	10	115]
[100,000	2021	3,704.40	10	283]
[100,000	2022	4,234.23	11	48]
[100,000	2023	4,789.26	11	139]
[100,000	2024	5,367.60	11	194]
[100,000	2025	5,967.36	11	215]
[100,000	2026	6,608.07	11	218]
[100,000	2027	7,268.94	11	199]
[100,000	2028	7,960.05	11	169]
[100,000	2029	8,694.00	11	137]
[100,000	2030	9,472.68	11	104]
[100,000	2031	10,284.12	11	68]
[100,000	2032	11,142.81	11	30]
[100,000	2033	12,065.76	10	357]
[100,000	2034	13,025.76	10	310]
[100,000	2035	14,037.66	10	259]
[100,000	2036	15,138.90	10	213]
[100,000	2037	16,317.00	10	170]
[100,000	2038	17,557.47	10	125]
[100,000	2039	18,900.00	10	85]

The Cash Value is zero after the last Policy Anniversary shown above.

*Cash Values and Extended Term Periods shown above on the Policy Anniversary presume payment of the annual premium shown in the Schedule of Premiums on page 3 to the end of the prior Policy Year, no changes to this Policy as shown on page 3, the Cumulative Premium Percentage shown for each Policy Year on page 3, no Policy Loan or accrued Loan Interest, and no Annual Dividends.

The Cash Value shown on the Policy Anniversary after the end of the Level Premium Period is the amount of the Return of Premium Benefit and presumes payment of the annual premium shown in the Schedule of Premiums on page 3 until the end of the Level Premium Period, no Policy Loan or accrued Loan Interest, and no Annual Dividends. The Extended Term Period shown on the Policy Anniversary after the end of the Level Premium Period assumes the Owner sends Us a Request to use the Return of Premium Benefit as a single premium to provide Extended Term Insurance on that Policy Anniversary. The interest rate for single premiums and minimum cash values is 4.0% a year. The mortality table for Extended Term Insurance and minimum cash values is the Commissioners 2001 CSO Standard Ordinary [Nonsmoker] Ultimate Age Last Birthday Mortality Table.

Note: The Cash Value and Return of Premium Benefit will vary based on the actual Cumulative Premium.

<i>SERFF Tracking Number:</i>	<i>STFL-126187658</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>42648</i>
<i>Company Tracking Number:</i>	<i>SFL080251AR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>Return of Premium Pg 3_4</i>		
<i>Project Name/Number:</i>	<i>ROP Cash Value Change/SFL08025.1AR</i>		

Supporting Document Schedules

	Item Status:	Status
		Date:
Satisfied - Item:	Flesch Certification	
Comments:	Flesch scores are not required for Policy Identification pages 3 and 4.	

	Item Status:	Status
		Date:
Satisfied - Item:	Application	
Comments:	This is an informational filing for revising only pages 3 and 4 and the Actuarial Memorandum. Policy was filed and previously approved.	